

19cv 6072

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SDNY PRO SE OFFICEUNITED STATES DISTRICT COURT
~~EASTERN DISTRICT OF NEW YORK~~
SOUTHERN DISTRICT OF NEW YORK

2019 JUN 28 AM 11:34

S.D. OF N.Y.

Nagibe ALhaj

Plaintiff,

CIVIL RIGHTS COMPLAINT

42 U.S.C. § 1983

[Insert full name of plaintiff/prisoner]

JURY DEMAND

YES _____ NO ☒

-against-

Kirby Fornsice psychiatric centerH-f-p-cWards Island complex East 4 West600 East 125th streetNew York, NY 10035-6095T 646 672-6819 or Brother 1716 563-0720

Defendant(s).

[Insert full name(s) of defendant(s). If you need additional space, please write "see attached" and insert a separate page with the full names of the additional defendants. The names listed above must be identical to those listed in Part I]

- I. Parties: (In item A below, place your name in the first blank and provide your present address and telephone number. Do the same for additional plaintiffs, if any.)

A. Name of plaintiff Nagibe H- ALhaj

If you are incarcerated, provide the name of the facility and address:

Kirby forensic psychiatric centerWards Island complex East600 East 125th st New York, NY 10035Prisoner ID Number: 702 987

If you are not incarcerated, provide your current address:

K.F.P.C 600 East 125th str NY-NY 10035
or 271 Ludington street
Buffalo, ny 14206 Sister Address
Telephone Number: 716 818 5188 or K.F.P.C 646 672 6819

B. List all defendants. You must provide the full names of each defendant and the addresses at which each defendant may be served. The defendants listed here must match the defendants named in the caption on page 1.

Defendant No. 1

Louis Agosta
Full Name

Patient
Job Title

K.F.P.C 600 East 125th St
New York, NY 10035
Address

Defendant No. 2

Dion ~~XXXXXXXXXX~~
Full Name

patient
Job Title

K.F.P.C.
K.F.P.C 600 East 125th street
New York, NY 10035
Address

Defendant No. 3

Full Name

Job Title

Address

Defendant No. 4

Full Name

Job Title

Address

Defendant No. 5

Full Name

Job Title

Address

II. Statement of Claim:

(State briefly and concisely, the facts of your case. Include the date(s) of the event(s) alleged as well as the location where the events occurred. Include the names of each defendant and state how each person named was involved in the event you are claiming violated your rights. You need not give any legal arguments or cite to cases or statutes. If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. You may use additional 8 ½ by 11 sheets of paper as necessary.)

Where did the events giving rise to your claim(s) occur? 4 west Day room
And A bath room

When did the events happen? (include approximate time and date)

in 6/10, 2019 8:pm, 6/14, 2019 patient Louis
Another date is 6/12, 2019 pm Tuesday, 18, 2019 7:15AM
4- salt shorges

letter About one month in have
ms rager came And. open the phone
for me - 6/10/2019 8pm

He mr Louis ~~ago~~ Agosta came -
class To me And. he dispaer from
me And. was behind me he panst
me in ms right ear as a late in me

Secand. mr. Dton was stepped me
in my left faice Date 6/12/19 pm

And. Louis Agosta he poste be one
on one he grab my cofe And.
pansh me pack so the tretment team
sea I have to cleven my safe -
the

And. mr Dton he disnt lowit
to be in the man Batherom
he have abetherom by him selfe -
he pansh me And. cat me in my
faut hid And. ms tham

I was reported. follow dates
4 time aslted. from
the Dimn station Dr mosaleit
Date tuesday 18/2019

بسم الله الرحمن الرحيم

I have ben violated in K.F.P.C.O.M.H.
 win I came to the hospitel Dr Saklig
 was toaching me. frist @ pivecey
 second I was hours in 3 east wine I
 come to the hospitel with good.
 Treet ment plan I go to 2 east
 have starte patient free for tea, rinold,
 peat up in the prayer. is a muslim man
 in 2 east and thin the Drs move me
 to 2 west in the shower Alin times
 cors me out - all my firmly And coll
 me a toris And he was coming to
 inside the chower with me And.
 senor Parsi was there win I was colling
 her And Another patient horassed
 me And. theathened. to hange up the phone
 it was SHTA so wat haping ms mo
 And they send me back to 2 east
 letter 8 sept 4, 2018 in K.F.P.C.
 win I foild from the bed. 3 times
 the embelinge took me to prony upahan
 Hos pitel center And. from that time
 in K.F.P.C I have ben Distrospected. from
 Doctors. SHTA - sainer taylor Dr mosaidet
 mosaidet

senortayler Dropping my level all time
 Dr mosaideit the Diminstration
 she send my sister And Brather Back
 To Buffalo, my win the come to visit me
 win I have a surgery in my Back
 broking Disc -

And. threaten And. removed. pricelidge
 And. phone restricted for 2 month
 no lawyer contact no justice center
 coll - in the hospital R.F.P.C
 I have a threaten from SHTA ms Koller
 And. no Adulation from 2 east to 3 east
 after speaking About the policy in the word
 they took me to the gut room in injected
 me two times one time by the
 Diminstration nurse ms hageep And ~~SHTA~~
~~the~~ bleeding all in my clothes SHTA
 mr canten vice me the finger two
 time following incident And removed
 me to 4 west win I have Date 4/12/2019
 no phone use to my lawyer or
 justice center hotp line so
 latter date mosa

Heilla

Facts: (what happened?) in 6/10/2019 pm

Mr-Louis, ~~Asota~~ He was coming to me.
 And I watch him so bad I sia what sope.
 he Desieper from me in it was behard my Back
 he then ~~apans~~ apanst in my right ear. I thank Allah
 that drume never pap SHTA was there
 second-time het my from my Back that's to
 selten shorget he post pc @ in @ bat not
 it was in 6/14/2019 8:30 pm

second. pation Dron slapped me in my
 face wan I watch the fight in the hall
 way SHTA was there second. cat me
 or scrats me in for head And the Left
 thumb Fenser the life finger cat one inch in a ~~quarter~~
 $\frac{1}{4}$ inch I was is falk order so the
 doctor psychi ~~at~~ move me immediately
 To Back in 2 east unit with inger and.
 hert from women man Dron And Louis
 pay tiones in 4 west unit-

II.A. Injuries. If you are claiming injuries as a result of the events you are complaining about, describe your injuries and state what medical treatment you required. Was medical treatment received?

yes ear And hand. cat from
 2 patient

yes medical treatment
 for the injuries

III. Relief: State what relief you are seeking if you prevail on your complaint.

20,000,000 twenty thousand dollars
for my scope in setting me
as parishment patron ~~see~~

to be in ward's 4 west-

I declare under penalty of perjury that on 6/21/2019 (date) I delivered this
complaint to prison authorities at Nagibe Alhaj (name of prison) to be mailed to the United
States District Court for the ~~Eastern~~ Southern District of New York.

I declare under penalty of perjury that the foregoing is true and correct.

Dated: 6/20/2019

Nagibe Alhaj
Signature of Plaintiff

K-F-P-C
Name of Prison Facility or Address if not incarcerated

wards island complex 20ast
600 East 125th street
new York, New York 10035
Address

702987
Prisoner ID#

Naqib Alhai
MANHATTAN PSYCHIATRIC CENTER
KIRBY FORENSIC PSYCHIATRIC CENTER
WARDS ISLAND COMPLEX *Least*
NEW YORK, NEW YORK 10035-6095

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SONY PRO SEC OFFICE

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